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PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

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Application Number	
Filing Date	
First Named Inventor	
Group Art Unit	
Examiner Name	
Attorney Docket Number	24469

I hereby appoint:

☐ Practitioners at Customer Number ☐ Practitioner(s) named below:Place Customer  
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Name	Registration Number
Ira S. Dorman	24469
330 Roberts Street, Suite	
East Hartford, Connecticut	
USA	

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name

Goran Dimitrov Georgiev

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/01 (10-00)

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	
	<b>First Named Inventor</b>	GEORGIEV, Goran Dimitrov
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	/
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND DEVICE FOR CONNECTION AND ADJUSTMENT OF OPTICAL UNITS: ELEMENTS, MODULES, DEVICES AND SYSTEMS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) 08/02/2000

as United States Application Number or PCT International

Application Number BG00/00022 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
103695	Bulgaria	08/27/1999	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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PTO/SSA/1 (10-00)

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# POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	
Group Art Unit	
Examiner Name	
Examiner Phone Number	3465

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I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SSA/96)

SIGNATURE of Applicant or Assignee of Record

Name

Alexander Efimov Ivanov

Signature

Date

Notarization of this document is required for the registration of a trademark or service mark. Any comments on this document should be directed to the Patent and Trademark Office, Washington, DC 20503.

Please type in this space (1) Name of the inventor

Under the Patent and Trademark Act of 1980, no person is required to answer in response to a question of this nature if the answer is not necessary to the examination of the application.

# DECLARATION - Utility or Design Patent Application

Grant of certain privileges to ☐ Designer ☐ Inventor ☐ as ☐ Co-inventor or co-designer ☐ Co-inventor and co-designer

Name IRA D. DORTCH

Address 110 Roberts Street, Suite 200

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App. No. 01102

Priority (1980) 528-0777 (1980) 528-0755

I, the undersigned, declare that I am the inventor or designer of the invention herein claimed, and that I am the owner of the right to the invention herein claimed, and that I am the owner of the right to the invention herein claimed, and that I am the owner of the right to the invention herein claimed.

I declare the first invention

☐ A person has taken steps for this invention

Michael West, 504

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Country Bulgaria

Residence Sofia

**BEX**

Working address Apartment 54, Zone B-19, St. 12-12, Blvd A, et. 17

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App. No. 1309

Country Bulgaria

NAME OF SECOND INVENTOR:

☐ A person has taken steps for this invention

Alexander EFIMOV

Family Name IVANOV

Country Bulgaria

Residence Burgas

**BEX**

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Working address

City Burgas

App. No. 7000

Country Bulgaria

☐ Address of inventor or designer on day of filing

Address of inventor or designer on day of filing

App. No.